

CHAPTER 4 – PERSONNEL

4-1 STAFFING DURING SURGE

Strategy for RNs

Outlined in the Guidelines for Managing Inpatient and Outpatient Surge Capacity, the Wisconsin State Expert Panel has developed the Staffing Strategy for RNs during Surge¹ to be used as a best practice for planning for surge staffing. As the most current guidance on this topic, the Wisconsin Guidelines is referenced here as a model or sample for both existing facilities and Alternate Care Sites.

In the first 96 hours of a surge, there will be limited additional staff; therefore, the following staffing strategies have been identified to extend the staff capacity of a healthcare facility:

Priority	Strategy
One	Adapt staffing ratios to need. Each of the designated patient care levels (critical, complex/critical, basic, and supportive) will require different staffing ratios.
Two	8-hour shifts may be changed to 12-hour shifts.
Three	Prioritize tasks so only essential patient care tasks are provided by staff.
Four	Consider flexing scope of practice of staff to provide necessary care with available staff (when authorized by the Governor during a declared state of emergency to allow flexed scope of practice).
Five	<ul style="list-style-type: none"> Use media to contact volunteer healthcare workers. Acquire staff through established MOUs and partnerships with other facilities. Alternate labor sources such as MRCs, Community Emergency Response Teams (CERTs), etc.

Note: See 4-5, Potential Staffing Sources (Tool).

Assignment of Staff to Designated Patient Care Facilities

In a surge incident, it is most likely that the healthcare facility will not have the appropriate complement of RNs and other staff. The organization will need to assign available staff and volunteers to the designated care levels, based on the staff level and scope of practice. The recommendations below are minimum skill sets that staff should have in order to provide patient care, based on the care level designation of the patient:²

Patient Care Level	Staff	Minimal Skill Set
Critical	Acute Care RNs and Residents. To increase productivity, also use acute care LVNs, technicians, PCAs, and student nurses to assist.	Can perform primary and secondary assessment of critical care patients.
Complex/Critical	RNs and LVNs who are presently employed either in acute care settings or in non-healthcare facility worksites.	Can perform initial and ongoing assessment of patients.

¹ State of Wisconsin. Guidelines for Managing Inpatient and Outpatient Surge Capacity, Recommendations of the State Expert Panel on Inpatient and Outpatient Surge Capacity. November 2005.

² *ibid.*

Patient Care Level	Staff	Minimal Skill Set
Basic and Supportive	Staff or volunteers: hospice volunteers, clergy, social workers, retired healthcare workers, healthcare facility volunteers, and members of service organizations, such as the American Red Cross. An RN supervisor and Team Leader in each area are needed to assess these staff, their skills, and their critical incident stress management needs.	Are comfortable with death and dying.

Note: See 4-5, Potential Staffing Sources (Tool).

Essential Staff Chart

The following chart (excerpted from Good Samaritan Hospital, San Jose, California, Pandemic Influenza Plan) lists the staff necessary to maintain essential hospital operations during a surge emergency, in which available resources and personnel are increasingly scarce. The chart also notes essential functions that may be completed off campus (at an alternate location) or from a staff member's home.

Department	Essential Function Work On-Site	Essential Function Work from Alternate Location	Essential Function Work from Home
Accounting		X	X
Administration	X (Limited)	X	X
PAS – Admitting	X		X (Verifiers)
PAS – ED Admitting	X		
Biomedical	X		
Behavioral Health Serv. Outpt.	X		
Cardiac Cath Lab	X		
Case Management	X (Limited)		
Central Services	X		
Communications	X		
Dietary Dept. – Food and Nutritional Services Cafeteria	X (May use pre-packaged to reduce needed staff)		
EKG	X		
EVS	X		
Facilities Management	X (Engineers)	X (Office staff)	X (Work Orders)
HIM	X		X (Coders)
Human Resources	X (Limited on-site, Assist in obtaining staff)	X	X
Infection Control	X		X (Limited)
IS		X	X
Laboratory	X		
Linen Distribution		X	
Marketing/PR		X	X
Medical Staff Library		X	X
Medical Staff Services	X (Limited for privileging)		X
Nuclear Medicine	X		
Nursing Administration	X		X (Limited)
Pathology	X		
Pharmacy	X		
Physical Therapy Inpatient	X (Limited)		
Physician Services		X	
Plant Ops	X		
Pre-Surgical Admitting	X (Limited)		X
Pulmonary Function	X		
Quality Management/Risk Management	X (Limited)	X	X
Radiology	X		X (Scheduling)
Rehabilitation Services	X		
Respiratory Therapy	X		
Security	X		
Social Services	X (Limited on-site)	X	X
Special Procedures	X		
Sterile Processing	X		
Surgical Services	X		
Supply Chain	X		X
Transcription Services		X	X
Transport	X		